## BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECOF Effective October 1, 2003									RD Application or Docket Number				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY					
TOTAL CLAIMS			7		·		-	RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		1	BASIC FE	EE 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			7 minus 20=		•		1	X\$ 9=		ОЯ			
INDEPENDENT CLAIMS			2 minus 3 =		•		1	X43=	+	7	Y00		
MULTIPLE DEPENDENT CLAIM PI			RESENT				1	+145=	+	HOR			
• 11	* If the difference in column 1 is less than zero, enter "0" in column 2									OR	<u> </u>		
=1									<u> </u>	OR	_	770	
CLAIMS AS AMENDED - PART !!  (Column 1) (Column 2  CLAIMS HIGHEST						(Column 3)	<b>)</b>	SMALL	ENTITY	OR	OTHER SMALL		
AMENOMENT A		REMAINING AFTER AMENDMENT		PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Š	Total	. 9	Minus	~	2	=		X\$ 9=	/	OR	X\$18=		
AME	Independent	2	Minus	•••	2_	=		X43=	1./	OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1	+145=	1/	OR	+290=	/	
(Column 1) (Column 2) (Column 3)								TOTAL ADDIT. FEE			TOTAL, ADDIT. FEE	/ ·	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• 9	Minus	- 2	ソ_			X\$ 9=		OR	X\$18=		
	Independent	NTATION OF THE	Minus	DENIDE :	<u> </u>	<u> -/</u>	Ιſ	X43=		OR	X86=	7	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	/	
	•						A	TOTAL ODIT. FEE		OR ,	YOTAL ADDIT, FEE		
<del>_</del>		(Column 1)		(Colina	)	(Column 3)	1 -					]	
AMENDMENTC	•	REMAINING AFTER AMENDMENT		NUME I PREVIOU PAID FO	FT.Y	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
2	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=		
Ĭ.			Minus	***		•		X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT IM									OR			
	* If the entry in column 1 is less than the entry in column 2, w 1 column 3.  *If the "Highest Number Previously Paid For" IN THIS SPACE is than 20, enter "20."  *If the "Highest Number Previously Paid For" IN THIS SPACE is than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is than 3, enter "3."												
	PTO-875 (Re: 10/	ber Previously Paid	For (Total or	Indeper	l 9: <sup>-</sup> -	highest number			•		IMA 1. PATMENT OF (	<b>XONMERCE</b>	